



AA 2167

## TRANSMITTAL FORM

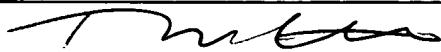
(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	18	Application No.	10/749,851
		Filing Date	December 30, 2003
		First Named Inventor	Ingo Zenz
		Art Unit	2167
		Examiner Name	Rayyan, Susan F.
		Attorney Docket Number	6570P017

### ENCLOSURES (check all that apply)

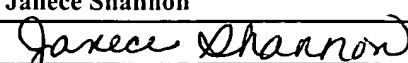
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply  <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  <div style="border: 1px solid black; height: 40px; width: 100%;">Return postcards (2).</div>
<input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> PTO/SB/08	<input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)  <input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
<div style="border: 1px solid black; height: 20px; width: 100%;">Remarks</div>		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Thomas C. Webster, Reg. No. 46,154  BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	2/9/07

### CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Janece Shannon		
Signature		Date	2/9/2007

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (ndc) 10/12/2006.  
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# **Fee Transmittal for FY 2006**

*Patent fees are subject to annual revision.*

Applicant claims small entity status. See 37 CFR 1.27.

**TOTAL AMOUNT OF PAYMENT** **(\\$)** **0.00**

<b>Complete if Known</b>	
Application Number	10/749,851
Filing Date	December 30, 2003
First Named Inventor	Ingo Zenz
Examiner Name	Rayyan, Susan F.
Art Unit	2167
Attorney Docket No.	6570P017

**METHOD OF PAYMENT** (*check all that apply*)

Check  Credit card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.  Credit any overpayments

## **FEE CALCULATION**

## 1. EXTRA CLAIM FEES

EXTRA CLAIM FEES		Extra Claims	Fee from below	Fee Paid
Total Claims	22	22*	0	50.00
Independent Claims	4	4*	0	200.00
Multiple Dependent				

Large Entity		Small Entity		<u>Fee Description</u>
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple Dependent claim, if not paid
1204	790	2204	395	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (1)</b>				<b>(S)</b>
				<b>0.00</b>

*\*\*or number previously paid, if greater. For Reissues, see below.*

## 2. ADDITIONAL FEES

### 2. ADDITIONAL FEE

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.
2053	130	2053	130	Non-English specification
1251		2251		Extension for reply within first month
1252		2252		Extension for reply within second month
1253		2253		Extension for reply within third month
1254		2254		Extension for reply within fourth month
1255		2255		Extension for reply within fifth month
1401		2401		Notice of Appeal
1402		2402		Filing a brief in support of an appeal
1403		2403		Request for oral hearing
1451	1,510	2451	1,510	Petition to institute a public use proceeding
1460		2460		Petitions to the Commissioner
1807		1807		Processing fee under 37 CFR 1.17(q)
1806		1806		Submission of Information Disclosure Stmt
1809		1809		Filing a submission after final rejection (37 CFR § 1.129(a))
1810		2810		For each additional invention to be examined (37 CFR § 1.129(b))

**Other fee (specify)**

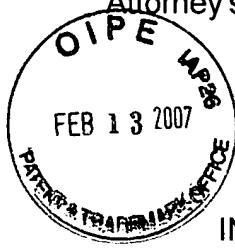
**SUBTOTAL (2)**

1

**Complete (if applicable)**

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Thomas C. Webster	Registration No. (Attorney/Agent)	46,154	Telephone (408) 720-8300
Signature			Date	2/9/07

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 12/15/2004.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



Attorney's Docket No.: 6570P017

Patent

**AMENDMENT UNDER 37 C.F.R. §1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP 2167**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:

Ingo Zenz

Application No.: 10/749,851

Filed: December 30, 2003

For: System And Method For Managing  
Multiple Application Server Clusters Using  
A Hierarchical Data Object And A Multi-  
Parameter Representation For Each  
Configuration Property

Examiner: Rayyan, Susan F.

Art Group: 2167

Confirmation No: 9437

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Commissioner For Patents  
P.O. Box 1450  
Alexandria, V.A. 22313-1450

**AMENDMENT AFTER FINAL ACTION UNDER 37 C.F.R. §1.116**

Sir:

In response to the Office Action, mailed December 12, 2006, which was made final, applicant submits this Amendment After Final Action for consideration.

**FIRST CLASS CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

February 9, 2007

Date of Deposit

Janece Shannon

Name of Person Mailing Correspondence

Janece Shannon

Signature

2/9/2007

Date

App. No.: 10/749,851  
Amdt. dated Feb. 8, 2007

-1-

Reply to Final Office action of Dec. 12, 2006

Atty. Docket No.: 6570P017